	ARIZONA STATE DEPARTMENT OF HEALTH DIVISION OF VITAL STATISTICS  AMENDMENT TO VITAL RECORD								
Identifying information about the registrant as it appears on the original record:									
	A. Name of Registrant Bruce McFadden B. File No. 97								
٠,(	C. Date { Birth	January MONTH	10 PAY	1910 D. P	lace	Gila_		Roosevelt	
f	E. ITEM ON	CERTIFICATE	J	YEAR BEFORE AMENDME		COUNTY		CITY	
1	Child's name		Pruce McFadden			G. ENTRY AFTER AMENDMENT Arden Bruce McFadden			
2	GRAZICE S IRABIC		DINGE MO.	Ardi	Arden Bruce Mcrauden				
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H. ABSTRACT OF SUPPORTING DOCUMENTS									
1.	INFORMATION CONCERN	idavit, father		McFadden		12-27	-56	DATE ORIG. ENTRY	
	Child's name: Arden Bruce McFadden					DATE ISSUED   DATE ORIG. ENTRY   12-27-56			
2	Personal affidavit, aunt Mrs. Elsie Newton					12-27-56 DATE ORIG. ENTRY			
	Child's name: Arden Bruce McFødden  Type of Document Arizone Operator Say whom issued and signed Date Issued Date Orig. Entry License No. 379884 C. L. Lane 1-4-55 1-4-55								
	License No.	Lane	AND SIGNED			DATE ORIG. ENTRY			
3.	INFORMATION CONCERNS	License No. 379884 C. L. Lane 1-4-55 1-4-55 Information concerning registrant in document Child's name: Arden Bruce McFadden							
	TYPE OF DOCUMENT		BY WHOM ISSUED AND SIGNED			DATE ISSUED		DATE ORIG. ENTRY	
	INFORMATION CONCERN	NG REGISTRANT IN DOCU	MENT )	-/ 0 - 4/				•	
	I hereby certify that I have examined the documents referred to above and that the abstract is true and correct.								
¥	REGISTRAR'S  CERTIFICATION  STATE REGISTRAR			EVIDENCE REVIEW			DATE	FILED	
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